

**Application Data Sheet****Application Information**

Application number:: Unknown  
Filing Date:: July 10, 2006  
Application Type:: Regular  
Title:: HEADGEAR CONNECTION  
ASSEMBLY FOR A  
RESPIRATORY MASK  
ASSEMBLY  
Attorney Docket Number:: 4398-567  
Total Drawing Sheets:: 27  
Small Entity?:: No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Australia  
Status:: Full Capacity  
Given Name:: Memduh  
Family Name:: GUNEY  
City of Residence:: Killara  
Country of Residence:: New South Wales, Australia  
Street of mailing address:: c/o RESMED LTD., 1 Elizabeth MacArthur Drive  
City of mailing address:: Bella Vista  
Country of mailing address:: New South Wales,  
Australia  
Postal or Zip Code of mailing address:: 2153  
Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Australia  
Status:: Full Capacity  
Given Name:: Amal  
Family Name:: AMARASINGHE

|   |  |
|---|--|
| City of Residence::                     | Beecroft                                     |
| Country of Residence::                  | New South Wales, Australia                   |
| Street of mailing address::             | c/o RESMED LTD., 1 Elizabeth MacArthur Drive |
| City of mailing address::               | Bella Vista                                  |
| Country of mailing address::            | New South Wales,<br>Australia                |
| Postal or Zip Code of mailing address:: | 2153   |
| Applicant Authority Type::              | Inventor                                     |
| Primary Citizenship Country::           | Australia                                    |
| Status::                                | Full Capacity                                |
| Given Name::                            | Perry  |
| Family Name::                           | LITHGOW                                      |
| City of Residence::                     | Glenwood                                     |
| Country of Residence::                  | New South Wales, Australia                   |
| Street of mailing address::             | c/o RESMED LTD., 1 Elizabeth MacArthur Drive |
| City of mailing address::               | Bella Vista                                  |
| Country of mailing address::            | New South Wales,<br>Australia                |
| Postal or Zip Code of mailing address:: | 2153   |
| Applicant Authority Type::              | Inventor                                     |
| Primary Citizenship Country::           | Australia                                    |
| Status::                                | Full Capacity                                |
| Given Name::                            | Milind                                       |
| Family Name::                           | RAJE   |
| City of Residence::                     | Wentworthville                               |
| Country of Residence::                  | New South Wales, Australia                   |
| Street of mailing address::             | c/o RESMED LTD., 1 Elizabeth MacArthur Drive |
| City of mailing address::               | Bella Vista                                  |
| Country of mailing address::            | New South Wales,<br>Australia                |
| Postal or Zip Code of mailing address:: | 2153   |

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|---|--|
| Applicant Authority Type::              | Inventor                                     |
| Primary Citizenship Country::           | Australia                                    |
| Status::                                | Full Capacity                                |
| Given Name::                            | Aaron  |
| Family Name::                           | DAVIDSON                                     |
| City of Residence::                     | Newport                                      |
| Country of Residence::                  | New South Wales, Australia                   |
| Street of mailing address::             | c/o RESMED LTD., 1 Elizabeth MacArthur Drive |
| City of mailing address::               | Bella Vista                                  |
| Country of mailing address::            | New South Wales,<br>Australia                |
| Postal or Zip Code of mailing address:: | 2153   |
| Applicant Authority Type::              | Inventor                                     |
| Primary Citizenship Country::           | Australia                                    |
| Status::                                | Full Capacity                                |
| Given Name::                            | Michael                                      |
| Family Name::                           | JONES  |
| City of Residence::                     | Dundas                                       |
| Country of Residence::                  | New South Wales, Australia                   |
| Street of mailing address::             | c/o RESMED LTD., 1 Elizabeth MacArthur Drive |
| City of mailing address::               | Bella Vista                                  |
| Country of mailing address::            | New South Wales,<br>Australia                |
| Postal or Zip Code of mailing address:: | 2153   |

#### **Correspondence Information**

|                                  |       |
|----------------------------------|-------|
| Correspondence Customer Number:: | 23117 |
|----------------------------------|-------|

#### **Representative Information**

|                                  |       |
|----------------------------------|-------|
| Representative Customer Number:: | 23117 |
|----------------------------------|-------|

**Domestic Priority Information**

|                  |   |                      |                      |
|------------------|---|----------------------|----------------------|
| Application::    | Continuity Type::   | Parent Application:: | Parent Filing Date:: |
| This application | An Application<br>claiming the benefit<br>under 35 USC 119(e) | 60/536,735           | 16 January 2004      |

**Foreign Priority Information**

|           |                      |                  |                    |
|-----------|----------------------|------------------|--------------------|
| Country:: | Application Number:: | Filing Date::    | Priority Claimed:: |
|           |                      | DAY/MONTH/YEAR   |                    |
| PCT       | PCT/AU2004/001834    | 24 December 2004 | Yes                |

**Assignee Information**

|                               |                             |
|-------------------------------|-----------------------------|
| Assignee Name::               | RESMED LTD.                 |
| Street of mailing address::   | 1 Elizabeth MacArthur Drive |
| City of mailing address:      | Bella Vista                 |
| Country of mailing address::  | New South Wales, Australia  |
| Postal or Zip Code of mailing | 2153                        |
| Address::                     |                             |